



Commonwealth  
of Massachusetts

Center for Health  
Information and Analysis

# All Payer Claims Database Data Volume Reports

## 2008 - 2012

### March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: [CHIA-APCD@state.ma.us](mailto:CHIA-APCD@state.ma.us).

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)  
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

Great-West Life & Annuity Insurance Company - FAC														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	87	87
PR	2011	0	0	55	0	87	54	0	0	46	0	0	22	264
PR	2012													
ME	2009	0	0	0	0	0	0	0	0	0	0	0	12,521	12521
ME	2010	0	0	0	0	0	0	0	0	0	0	0	3,880	3880
ME	2011	3,770	3,693	3,612	3,500	3,432	3,880	2,413	2,302	2,226	2,140	2,034	599	33,601
ME	2012	465	381	342										1188
PV	2011	448	83	36	28	23,772	89	119	69	42	45	29	13	24773
PV	2012	19												19
MC	2008	129	352	613	857	726	616	698	673	747	920	784	1,122	8237
MC	2009	1,674	2,785	3,429	4,159	4,653	4,998	5,630	4,780	5,889	5,696	6,029	6,383	56,105
MC	2010	4,284	1,684	1,017	901	506	339	356	328	212	133	110	43	9,913
MC	2011	24	14	18	5	61	132	59	40	6	26	22	27	434
MC	2012													
PC	2008	95	229	235	304	250	270	237	261	293	263	307	420	3164
PC	2009	898	1,252	1,243	1,655	1,770	1,854	2,017	2,135	2,182	2,241	2,188	2,409	21844
PC	2010	844	117	99	114	107	1,069	29	21	9	15	8	0	2432
PC	2011	0	0	0	0	0	0	0	1	0	0	0	0	1
PC	2012													
DC	2008	1	4	22	19	23	18	18	37	18	11	22	37	230
DC	2009	158	239	345	338	500	445	497	459	370	501	393	482	4727
DC	2010	395	96	36	18	43	8	19	9	3	3			630
DC	2011	0	0	3	1	0	1	0	0	0	0	0	6	11
DC	2012													

**\*Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

**The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:**

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

**These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.**











